## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000009791 (3) DOCUMENT # 1. Corporation Name

Country

9. Name and Address of Current Registered Agent

25

GUCH, INC.

Principal	Place of	Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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5000 CENTRAL AVE. ST PETERSBURG FL 33707

2. Principal Place of Business

**GUCH, GEORGE** 

5000 CENTRAL AVE.

ST. PETERSBURG FL 33707

Suite, Apt. #, etc.

City & State

21

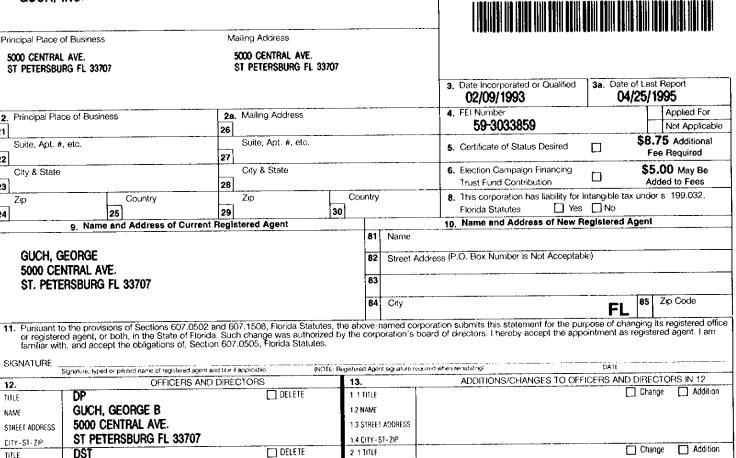
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Zip

5000 CENTRAL AVE. ST PETERSBURG FL 33707



SIGNATURE _	Signature, typed or printed name of registered agent and title if	applicable (f	NOTE: Registered Agent signature required	when reinstating)	DATE		
12.	DESIGNATION AND DIRECTORS		13.	ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1 1 TITLE		☐ Change	☐ Addition	
NAME	GUCH, GEORGE B		1.2 NAME				
STREET ADDRESS	5000 CENTRAL AVE.		1.3 STREET ADDRESS				
CITY-S1-ZIP	ST PETERSBURG FL 33707		1.4 CITY - S1 - ZIP		····		
TITLE	DST	☐ DELETE	2 1 TITLE		Change	☐ Addition	
NAME	GUCH, DEBORAH		2 2 NAME				
STREET ADDRESS	5000 CENTRAL AVE.		2 3 STREET ADDRESS				
CITY - ST - ZIP	ST PETERSBURG FL 33707		2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3 1 TITLE		☐ Change	☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3. STREET ADDRESS				
CITY - ST - ZIP			3 4 CITY-ST-ZIP				
TITLE		☐ DELETE	4. 1 TINE		Change	Addition	
NAME			4.2 NA 1E				
STREET ADDRESS			4.3 ST ET ADDRESS				
CITY-ST-ZIP			4.4 CF - ST - ZIP			FT Addition	
TITLE		☐ DELETE	5 1 T		Change	Addition	
NAME			5.2 NA				
STREET ADDRESS			5.3 ST ET ADORESS				
CITY - ST - ZIP			5 4 CIT ST-ZIP		F7 Chann	C Addition	
TITLE		☐ DELETE	6 1 T/1 ::		Change	Addition	
NAME	1		6.2 NAME				
STREET ADDRESS			6 3 STREET ADDRESS				
CITY-SI-ZIP			6 4 CITY - ST - ZIP				

Country

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City

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if char

SIGNATURE: \_\_\_

813-321-8306 Dayline Prope #